								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECORD												
Effective October 1, 2000 09 770769												
CLAIMS AS FILED - PART I								SMALL EN	TTTY		OTHER	
			n 1)	(Column 2)			TYPE C	OR	SMALL			
TOTAL CLAIMS			1640					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			30 minus 20=		30			X\$ 9=		OR	X\$18≈	648
INDEPENDENT CLAIMS			minus 3 =		14			X40=		OR	X80=	32 <i>0</i>
MULTIPLE DEPENDENT CLAIM PRESENT						M		+135=		OR	+270=	270
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1948
CLAIMS AS AMENDED - PART II								011044			OTHER SMALL	
7	37.01	1	SMALL		OR	SMALL						
NT A		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST 18ER IOUSLY 1 FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	• 31	Minus	5	śφ	- /		X\$ 9=		OR	X\$18=	
MEN	Independent	• 5	Minus		7	- /		X40=	•	OR	· X80≖	·
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	I CLAIM	لبلا		+135≖		OR	+270=	
In	rproper ??						J	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
10 - 27 - 04 (Column 1) (Column 2) (Column 3)									7"		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·
8		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	REST MBER NOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL . FEE		RATE	ADDI- TIONAL FEE
Ş	Total	· 35	Minus	••	56	= /		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	• 5	Minus	•••	7	=/		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)								•				
ENT C		CLAIMS REMAINING AFTER AMENDMENT		NUL PREVI	MEST MBER KOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	.37	Minus	7	35	= /	] (	X\$ 9=	Å	OR	X\$18=	
ME	Independent	• 7	Minus	•••	3	2 -	И	\ X40=	/\	OR	X80≅	
[_	FIRST PRESE	NTATION OF M	ULTIPLE D	PENDEN	T CLAIM		J		/-\		/	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OF	+270=	
"If the entry in column 1 is less than the entry in column 2, write "of in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE												
•	The Highest Nur	most Previously Pa	id For (Total	or Independ	dent) is the	highest number	er lou	and in the app	od etaingore	k in co	lumn 1.	.

FORM PTO-878